

Employer's LCA Request Form

Job Title	<input type="text"/>
Salary	<input type="text"/>
Work Site Address	<input type="text"/>
No. of Employees in this LCA	<input type="text"/>
Company Name (full)	<input type="text"/>
Company Details	
Address	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
IRS Tax ID No.	<input type="text"/>
Signatory Name	<input type="text"/>
Signatory Title	<input type="text"/>
Company Contact person for our Law offices	
Name	<input type="text"/>
Title	<input type="text"/>
Name	<input type="text"/>
Fax	<input type="text"/>
E Mail	<input type="text"/>

Legal Visa Law Offices, LLC
221 Briarheath Lane,
Naperville, IL - 60559 USA

Fax : (630) 548-5700

Phone : **(630) 548-5730**

E Mail : info@legal-visa.com